Docket No.	
MAS-0001	

Declaration and Power of Attorney For Patent Application English Language Declaration

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

my residence, post office address and suzeriorip are as stated below next to my name,				
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled				
METHOD, SYSTEM, AND STORAGE MEDIUM FO	OR OPTIMIZING DISK SPACE AND INFORMATION			
the specification of which				
(check one)				
☑ is attached hereto.				
□ was filed on as United States Application No. or PCT International				
Application Number				
and was amended on				
-	(if applicable)			
I hereby state that I have reviewed and unders including the claims, as amended by any amen	stand the contents of the above identified specification, adment referred to above.			
	ed States Patent and Trademark Office all information as defined in Title 37, Code of Federal Regulations,			
Section 365(b) of any foreign application(s) for any PCT International application which design listed below and have also identified below, by	Title 35, United States Code, Section 119(a)-(d) or patent or inventor's certificate, or Section 365(a) of nated at least one country other than the United States, checking the box, any foreign application for patent or cation having a filing date before that of the application			
Prior Foreign Application(s)	Priority Not Claimed			
•				
(Number) (Country)	(Day/Month/Year Filed)			
(Number) (Country)	(Day/Month/Year Filed)			
(Number) (Country)	(Day/Month/Year Filed)			

I hereby claim the benefit under application(s) listed below:	35 U.S.C. Section 119(e)	of any United States provisional		
60/396,622	7/17/2002			
(Application Serial No.)	(Filing Date)			
(Application Serial No.)	(Filing Date)			
(Application Serial No.)	(Filing Date)			
I hereby claim the benefit under 35 U. S. C. Section 120 of any United States application(s), or Section 365(c) of any PCT International application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. Section 112, I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, C. F. R., Section 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application:				
(Application Serial No.)	(Filing Date)	(Status) (patented, pending, abandoned)		
(Application Serial No.)	(Filing Date)	(Status) (patented, pending, abandoned)		
(Application Serial No.)	(Filing Date)	(Status)		

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

(patented, pending, abandoned)

agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (list name and registration number) All Attorneys and Agents Associated with Customer Number 23413 Send Correspondence to: CANTOR COLBURN LLP 55 Griffin Road South Bloomfield, CT 06002 Direct Telephone Calls to. (name and telephone number) Marisa J. Dubuc, Esq. (860) 286-2929 Full name of solo or first inventor Wayne P. Masse Suls is inventor 56 Morgan Street, Granby, MA 01033 Citizenship U.S.A. Post Office Address Same as Residence Full hanie of second inventor, if any Second inventor's signature Residence Cinzenship Port Olice Address

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or

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